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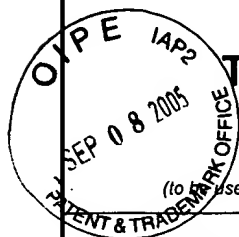


PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5 + refs.

Application Number

09/900,320

Filing Date

July 6, 2001

First Named Inventor

SOETIKNO, ROY M.

Group Art Unit

3738

Examiner Name

LANDREM, KAMRIN R.

Attorney Docket Number

STAN-219

ENCLOSURES (check all that apply)

- | | | |
|--|--|--|
| <p><input checked="" type="checkbox"/> Fee Transmittal Form</p> <p><input type="checkbox"/> Fee Attached</p> <p><input type="checkbox"/> Amendment / Reply</p> <p><input type="checkbox"/> After Final</p> <p><input type="checkbox"/> Affidavits/declaration(s)</p> <p><input type="checkbox"/> Extension of Time Request</p> <p><input type="checkbox"/> Express Abandonment Request</p> <p><input checked="" type="checkbox"/> Information Disclosure Statement</p> <p><input type="checkbox"/> Certified Copy of Priority Documents</p> <p><input type="checkbox"/> Response to Missing Parts/Incomplete Application</p> <p><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53</p> | <p><input type="checkbox"/> Assignment Papers (for an Application)</p> <p><input type="checkbox"/> Drawing(s)</p> <p><input type="checkbox"/> Licensing-related Papers</p> <p><input type="checkbox"/> Petition</p> <p><input type="checkbox"/> Petition to Convert to a Provisional Application</p> <p><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address</p> <p><input type="checkbox"/> Terminal Disclaimer</p> <p><input type="checkbox"/> Request for Refund</p> <p><input type="checkbox"/> CD, Number of CD(s)</p> | <p><input type="checkbox"/> After Allowance Communication to Group</p> <p><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences</p> <p><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)</p> <p><input type="checkbox"/> Proprietary Information</p> <p><input type="checkbox"/> Status Letter</p> <p><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):</p> <ol style="list-style-type: none">1. Credit Card Form PTO-20382. Copies of cited references3. Form PTO/SB/08A4. Postcard |
|--|--|--|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent
(Reg. No.)

PAMELA J. SHERWOOD, 36,677
BOZICEVIC, FIELD & FRANCIS, LLP

Signature

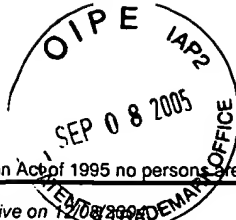
Date

September 8, 2005

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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 10/08/2005 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/900,320
		Filing Date	July 6, 2001
		First Named Inventor	SOETIKNO, ROY M.
		Examiner Name	LANDREM, KAMRIN R.
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3738
TOTAL AMOUNT OF PAYMENT (\$) 180		Attorney Docket No.	STAN-219

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☒ **Credit Card** ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: **50-0815** Deposit Account Name: **Bozicevic, Field and Francis LLP**
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180
Total Claims		
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims		
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	_____ (round up to a whole number) x _____	_____	_____

4. OTHER FEE(S)

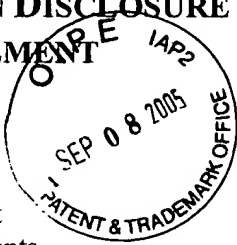
Non-English Specification, \$130 fee (no small entity discount)

Other: **Information Disclosure Statement****180****SUBMITTED BY**

Signature 	Registration No. (Attorney/Agent) 36,677	Telephone (650) 327-3400
Name (Print/Type) Pamela J. Sherwood	Date 09/08/2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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INFORMATION DISCLOSURE STATEMENT  Address to: Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket	STAN-219
	First Named Inventor	SOETIKNO, ROY M.
	Application Number	09/900,320
	Filing Date	July 6, 2001
	Group Art Unit	3738
	Examiner Name	LANDREM, KAMRIN R.
	Title:	"STENT REPOSITIONING AND REMOVAL"

Sir:

This is an Information Disclosure Statement submitted for the Examiner's consideration. This is being filed *after* three months of the filing date of this national application or the date of entry of the national stage as set forth in §1.491 in an international application or *after* the mailing date of the first Office Action on the merits, whichever event occurred last, but *before* the mailing date of either a final action under §1.113 or a notice of allowance under §1.311, whichever occurs first.

A Form PTO-SB/08A listing the references accompanies this paper. Applicants would appreciate the Examiner's initialing and returning the form to indicate that the references have been reviewed and made of record.

☒ All of the references identified herein are being submitted prior to the final determination on patentability by the Office.

This Information Disclosure Statement is not intended as a representation that a search has been made, that additional information material to the examination of this application does not exist, or that any one of the above references constitutes prior art to the present application within the meaning of 35 U.S.C. §102.

☒ Please charge the \$180.00 fee required by 37 C.F.R. §1.97(c) and set forth in 37 C.F.R. 1.17(p) and any additional fees which may be required by this paper or any fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21, or to credit any overpayment, to Deposit Account No. 50-0815, order number STAN-219.

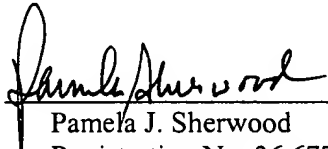
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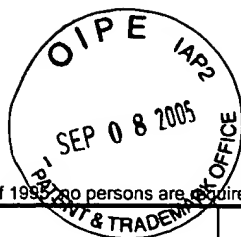
180.00 DP

Respectfully submitted,
 BOZICEVIC, FIELD & FRANCIS LLP

Date: September 9, 2005

By: 
 Pamela J. Sherwood
 Registration No. 36,677

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PTO/SB/08a (08-03)

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Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary) Sheet 1 of 1		Complete if Known	
		Application Number	09/900,320
		Filing Date	July 6, 2001
		First Named Inventor	SOETIKNO, ROY M.
		Art Unit	3738
		Examiner Name	LANDREM, KAMRIN R.
		Attorney Docket Number	STAN-219

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
		US-6,241,757	Jun. 5, 2001	An et al.	
		US-6,821,291	Nov. 23, 2004	Bolea et al.	
NON PATENT LITERATURE DOCUMENTS					
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T ²
		CHOOSTENT TM COVERED ESOPHAGEAL STENT, downloaded from http://mitech.co.nu/uploads/images/282/useguideesophachoo_english.pdf , July 26, 2005			
		LEE et al., NEW SELF-EXPANDABLE SPIRAL METALLIC STENT: PRELIMINARY CLINICAL EVALUATION IN MALIGNANT BILIARY OBSTRUCTION, 1995			
		Radlax, Radiology, TIMELINE, 1997, 203(3) 593-888			

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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